## New Hampshire Department of Agriculture, Markets & Food Bureau of Markets

## AGRICULTURAL NUTRIENT MANAGEMENT GRANT PROGRAM

## **2002-2003 APPLICATION**

(Pla	ease type or print clearly)
1. Project Title:	
2. Applicant/Organization:	
Contact Person:	
Mailing Address:	
City:	State:Zip Code:
Home Telephone:	Work Telephone:
Fax:	Email:
Location of Project and Di	rections to Project Site:
3. Grant Amount Requested:	
frame for project start and end da	you intend to accomplish and how? Indicate time ates. Attach a topographic map and/or aerial andforms, a project site map (may be hand as to help visualize problem areas.

5. Itemized Budget: (Be as specific as possible, show costs by category: labor, materials, etc. Indicate what costs or tasks will be provided by the applicant.)
6. Applicant background/qualifications: (For on-farm projects list relevant information on operation, such as crops, # acres, # animals, species, present manure management practices, farm building details, etc.)
7. Objectives: (Describe how this project intends to meet the program's goals relative to agricultural nutrients and water quality concerns.) Indicate the distance in feet to nearby surface waters, names of streams, ponds if known.
8. Date:
9. Signature:

Return four (4) copies of the application to:

NH Department of Agriculture, Markets & Food Bureau of Markets - ANM Grant Program PO Box 2042 Concord, NH 03302-2042 Fax: (603) 271-1109

Email: runcles@agr.state.nh.us